

ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION                  | INITIALS | ID NO. | DATE         |
|---------------------------|----------|--------|--------------|
| FEE DETERMINATION         |          |        |              |
| O.I.P.E. CLASSIFIER       |          | 6      | 8-2-01       |
| FORMALITY REVIEW          |          |        |              |
| RESPONSE FORMALITY REVIEW | C. J. W. |        | 20 Aug. 2001 |

### INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 ■ ..... Allowed      I ..... Interference  
 - (Through numeral) ... Canceled      A ..... Appeal  
 ÷ ..... Restricted      O ..... Objected

| Claim          | Date |
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| Claim          | Date |
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions  
staple additional sheet here

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